

# EXHIBIT D

CHARGE OF DISCRIMINATION		AGENCY	CHARGE NUMBER
This form is affected by the Privacy Act of 1974; See Privacy Act Statement before completing this form		<input type="checkbox"/> FEPA <input checked="" type="checkbox"/> EEOC	440-2018-00225
Illinois Department of Human Rights and EEOC			
State or local Agency, if any		S.S. No.	
NAME (Indicate Mr., Ms., Mrs.) I.V. Newson, Jr.		HOME TELEPHONE (Include Area Code) 773-580-8219	
STREET ADDRESS 246 Owen St.	CITY, STATE AND ZIP CODE Matteson, IL 60443	DATE OF BIRTH 3-3-64	
NAMED IS THE EMPLOYER, LABOR ORGANIZATION, EMPLOYMENT AGENCY, APPRENTICESHIP COMMITTEE, STATE OR LOCAL GOVERNMENT AGENCY WHO DISCRIMINATED AGAINST ME (If more than one list below.)			
NAME Cook County Sheriff	NUMBER OF EMPLOYEES, MEMBERS 500+	TELEPHONE (Include Area Code) 312-603-5500	
STREET ADDRESS 50 W. Washington St., Rm. 704	CITY, STATE AND ZIP CODE Chicago, IL 60602	COUNTY Cook	
NAME	TELEPHONE NUMBER (Include Area Code)		
STREET ADDRESS	CITY, STATE AND ZIP CODE	COUNTY	
CAUSE OF DISCRIMINATION BASED ON (Check appropriate box(es))		DATE DISCRIMINATION TOOK PLACE EARLIEST (ADEA/EPA) LATEST (ALL)	
<input checked="" type="checkbox"/> RACE <input checked="" type="checkbox"/> COLOR <input type="checkbox"/> SEX <input type="checkbox"/> RELIGION <input type="checkbox"/> AGE <input checked="" type="checkbox"/> RETALIATION <input type="checkbox"/> NATIONAL ORIGIN <input type="checkbox"/> DISABILITY <input checked="" type="checkbox"/> Hostile Work Environment		Late-2005 7-24-17 <input checked="" type="checkbox"/> CONTINUING ACTION	
THE PARTICULARS ARE (If additional paper is needed, attach extra sheet(s)):			
<p>I began my employment with the Respondent on 2-17-90, and have been continuously employed by Respondent for over twenty-seven years. My last position was Cook County Sheriff Investigator, Electronic Monitoring Unit. During my employment I have been subjected to discriminating terms and conditions of employment.</p> <p>Beginning in late-2005, and continuing through the present, I believe that I have been harassed, and discriminated against, based upon my race, African-American. Further, my direct supervisors, Director Shields, Chief Webb and Deputy Chief Logan continue to discriminate against me, and some have made derogatory comments to me in front of witnesses. They have caused false and unfair disciplinary reports to be filed against me, necessitating my having to file numerous grievances with Teamsters Local Union No. 700, resulting in my being wrongfully called to hearings before the Office of Professional Review. They continually treat the black investigators disparately different and less favorably than the caucasian investigators, and I have filed a number of complaints to my superiors and H.R. regarding unfair duty assignments and partner assignments. The caucasian investigators were not subjected to this unsafe and discriminatory treatment, including assigning me and my partner, Vernell Tims, also african-american, to investigate an incident involving a person known to have the disease of scabbies. In retaliation for my complaints and exercise of my protected rights, my superiors have filed more Disciplinary Action forms against me.</p> <p>I believe I have been discriminated against because of my race, African-American, in violation of Title VII of the Civil Rights Act of 1964, as amended. As a result of the above stated discrimination, I believe I have been forced to work in a hostile work environment, also in violation of Title VII of the Civil Rights Act of 1964, as amended.</p>			
I want this charge filed with both the EEOC and the State or local Agency, if any. I will advise the agencies if I change my address or telephone number and I will cooperate fully with them in the processing of my charge in accordance with their procedures.		NOTARY - (When necessary for State and Local Requirements)	
I declare under penalty of perjury that the foregoing is true and correct.		I swear or affirm that I have read the above charge and that it is true to the best of my knowledge, information and belief.	
I.V. Newson, Jr. 10-10-17 Date Charging Party (Signature)		SIGNATURE OF COMPLAINANT  SUBSCRIBED AND SWORN TO BEFORE ME THIS DATE (Day, month, and year)	